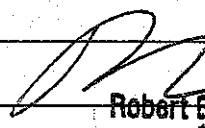


DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
6/24/04 Cont'd.	<p>(A) Allergic Rhinitis Folliculitis Chronic P. Educate Counsel re. allergies (Avoidance, diet, etc) (+ re. Folliculitis (Hygiene, Reg. Washing &amp; Soap &amp; avoid occlusive lotions, etc). Via Community 2 Tylenol/adult, Allergy Rx, decongestant nasal spray as directed Nasal Ins Spray @ #/nose BID (QAM/QPM) #1 c/box 3 Erythromycin 500mg TID x 10d #30 pref. RTE PRN 3 Understands/agrees</p>
	<p>Reviewed By: V. Geza, PharmD</p> <p> Robert E. Plotrowski, PA-C FOI McKean</p>

NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)

Chalk Board

A) Infant retus dysfunction

4/4/04

1450h

S/he says he still sees double looking  
up and to the (R) sideC/O pain in eye upper 9/11 nasal  
Repeats 3 times my eye in & nose  
Pain is related to healing may be permanent

of field of motion checked  
it's not obvious that the  
eye is lacking exact  
coordination with eye  
so it looks like he's getting both  
but he still complains of  
Diplopia in certain situations  
Distance - probably no surgery.

A) Still c/o Diplopia - Blount Tx  
B) Infant retus dysfunction

D) PTed: no change in plan  
Has Followups scheduled.

HOSPITAL OR MEDICAL FACILITY

STATUS

DEPART./SERVICE

RECORDS MAINTAINED AT

SPONSOR'S NAME

SSN/ID NO.

RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex;  
Date of Birth; Rank/Grade.)

REGISTER NO.

H. BEAM, MD  
FCI MCKEAN  
WARD NO.

19613-037

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000026

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT	TREATING ORGANIZATION (Sign each entry)
6/9/04 0700	Adm Note I met on township to see ophthalmologist	
6/10/04 0700	Adm Note I met returned from township, NSH not notified, & pending consult	D. Olson, MD Clinical Director
6/16/04 1400	Adm - letter from Dr Werts - Has had Blount's, Entrapment not resolved p 5 mo - recommends repair and release entrapment under general anesthesia  I'll discuss w/ him next visit I'll send request to VPI.	H. Beam, MD FCI MCKEAN

NSN 7540-00-534-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
1/30/04 1200 continued.	I/m was displeased with my answer & stated I was denying him his medication.  Violette Geza, PharmD. RPh Chief Pharmacist
4/30/04 1200	Adm. Note I note returned from township, v pending commit.  D. OLSON, M.D.
5/3/04 1500	Adm. quite functional with degree of impairment as is - "give 6 months" wait until 3 mo from the surgery - (if diphoria straight ahead) would need a repair.  CB & me 5/6/04 & TO away Mu & Tr Weiss

HOSPITAL OR MEDICAL FACILITY

STATUS

DEPART./SERVICE

RECORDS MAINTAINED AT

SPONSOR'S NAME

SSN/ID NO.

RELATIONSHIP TO SPONSOR

FCI Mc  
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PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)

REGISTER NO.

WARD NO.

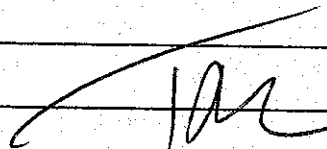
19613-039

Baker, Darryl

19613-039

CHRONOLOGICAL RECORD OF MEDICAL CARE  
Medical RecordSTANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/CMR  
FIRM (41 CFR) 201-9.202-1

000028

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
5/6/04 1300	<p>8/ Cheek back @ inferior rectus Fx &amp; @ blowout Fx - feels same better - Has pain looking up &amp; to R - at most angle to orbit. &amp; upper - feels like he's making progress</p>
	<p>07 To my exam @ Eom - much better @ elevation of eye - diplopia - slight @ looking up to R See - Dr Weiss! both glasses 'script OK - wearing glasses</p> <p>07 Dipping finding @ inferior rectus - healing blowout Fx @ orbit</p>
	<p>07 Prescribed use glasses - Following Dr Weiss &amp; with me 1 mo look</p>
	<p style="text-align: right;">   H. BEAM, MD  FCI MCKEAN </p>



NSN 7540-00-634-4176

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## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)		
	Adm:		
4/15/04 1300	D. Stathopoulos: Hacked Fracture (2/27/04) C some entrapment of inferior rectus. Rectus ~ 2 mo in Stathopoulos Outcome is fairly good in that his gaze is convergent in most positions -  H. Beam, MD FCI MCKEAN		
4/15/04 1330	S1 I spoke 1/2 m and relayed along information as to plan & followup 2) -  A) Healthy Tx (Odit inferior rectus mild entrapment - Functioned outcome reasonably good P) P10d - need for glasses & F16 plan Drs Stathopoulos' sent to Dr Howard for processing - see me 2 weeks		
HOSPITAL OR MEDICAL FACILITY		STATUS	DEPART./SERVICE
SPONSOR'S NAME		SSN/ID NO.	RELATIONSHIP TO SPONSOR
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

Daryl Baker

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)

Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000030

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
4/21/04 1430	<p>Adm - ① msg @ 0900 from Dr. Stathopoulos office -&gt; Dr. Weiss wants to see patient &amp; arrange this - 1 to 2 wks - I have 1/2 in down at morning &amp; so plan the plan but not essential detail</p> <p>R/u E me - 2 wks</p> <p>② scalp rash almost all both on Pen - he wants ref -</p> <p>Rx Pen VK 500 mg, 1/2 po bid # 40</p> <p>Reviewed By: V. Geza, PharmD</p> <p>H. BEAM, MD FCI MCKEAN</p>
4/30/04 0700	<p>Adm N/A</p> <p>Inmate in town trip to see ophthalmologist</p> <p>D. Olson, MD Clinical Director</p>
1/30/04 1200	<p>Admin Note: Pharmacy</p> <p>ILM reported to pill line after town trip to pick up medication. Mr. Montgomery had brought samples of Artificial tears to the pharmacy. I stated to the inmate we are not allowed to give out samples from an outside physician. This item is an OTC &amp; is available for purchase in commissary. ILM has sufficient funds to purchase the item &amp; is not considered indigent.</p> <p>(continued)</p>

NSN 7540-00-834-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
4/15/04 0930	Adm - 1/m on town trip
	H. BEAM, MD FCI MCKEAN
4/15/04 1130	Adm 1/m back from town trip
	H. BEAM, MD FCI MCKEAN
4/15/04 1230	Brief talk i 1m - 1'm calling in Stathopoulos for update - see new script more to follow
	H. BEAM, MD FCI MCKEAN

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT FCI McKean
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)			REGISTER NO. 19613-037
			WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE  
Medical RecordSTANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000032

Darryl Baker



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NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)		
4/4/04 1000	<p>Adm - 1/m on Town Trip</p> <p>H. BEAM, MD FCI MCKEAN</p>		
4/9/04 1200	<p>Adm - 1/m back from town trip</p> <p>H. BEAM, MD FCI MCKEAN</p>		
4/9/04 1200	<p>He had CT of orbit's today results not yet ready. PTed - long disunion - probably entrapment of extraocular muscles and I explained how that happens The physiology of it ⊕ Scalp laceration. D) look OK. - from - lacks ability to look up with ⊕ eye (gets down scalp - laceration was 3x4 cm - now 1 cm diameter A) Probable Extraocular muscle entrapment Probable Fungal infection Scalp P1 PTed - Reculva Pen Vic 500mg po Bid #40</p> <p>H. BEAM, MD FCI MCKEAN</p>		
<p>Reviewed By: V. Geza, Pharm D</p> <p>HOSPITAL OR MEDICAL FACILITY</p> <p>SPONSOR'S NAME</p> <p>PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)</p>			
STATUS		DEPART./SERVICE	RELATIONSHIP TO SPONSOR
SSN/ID NO.		REGISTER NO.	
WARD NO.		19613-039	

Darryl Baker

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000034

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
	Adm
4/12/04 1230	he didn't come down to view CT result I had told him to come at this time on 4/9/04 at that visit
	HBE
	H. BEAM, MD FCI MCKEAN
4/13/04 1100	main line He says he was at HCU yesterday at 1330 & didn't see him S; Explained down & up - He'll see in Stathopoulos soon CT results - old Fr & flexion in (re read by Dr. Welch after I called.
	plan (await in Stathopoulos) recommendation
	HBE
	H. BEAM, MD FCI MCKEAN

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE \_\_\_\_\_

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)

3/31/09  
15710

✓

D. Howard's note suggests on to an  
superior orbital nerve entrapment  
post injury 2/27/04

I talked to the Stat Agrs who  
recommened

1) CT of aorta including coronal views; 2mm segments

2) The approx a week later -  
In Stathoupolos

Will submit Trial to a/R court

H. BEAM, MD  
FCI MCKEAN

HOSPITAL OR MEDICAL FACILITY

STATUS
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DEPART./SERVICE

RECORDS MAINTAINED AT

SPONSOR'S NAME

SSN/ID NO.

RELATIONSHIP TO SPONSOR	
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Ed McKean

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)

REGISTER NO.

WARD NO.

SISTER NO. 19613-03

Darryl Baker

### CHRONOLOGICAL RECORD OF MEDICAL CARE

### Medical Record

**STANDARD FORM 600 (REV. 6-97)**  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000036

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
<p>4/1/07 0930</p>	<p>3) Followup Appt in Howard: See previous note - "when I look up I see double" (Since The Assault) ④ persistent bumps back of scalp ~ 2 yr</p>
	<p>⑦ looks OK all in all on extraocular motor testing - he can't look up above the rest point @ eye lateral movements OK Tender upper aspect of orbital rim @ eye</p>
	<p>⑧ irritated punctal area back of scalp</p>
	<p>A) - probable @ superior orbital muscle entrapment</p>
	<p>- Tinea Capiti P) PTed up on plan for correction see previous notes</p>
<p>Reviewed By: V. Geza, PharmD</p>	<p>Ketoconazole 200mg ipso QD #21 RPO CB 1mo</p>



NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT	TREATING ORGANIZATION (Sign each entry)
3/25/04 1420hr	41 y/o AD 09 Sub call cap-out re. LT. eye S/P Trauma 2/27/04 Submitted 3/22/04 - D-Range Shu. No show - Disch Compromised 3/24/04 Flu via H5U & Crystal sick call procedure. Spun CO reported - I'm doing well & % @ release. <i>[Signature]</i>	

Robert E. Piotrowski, PA-C  
FCI McKean

3/31/04  
1130

Adm - see reports ① more to follow on  
in Howard's evaluation  
② Has folliculitis on scalp - not into  
which he is adamant response  
to PCW; wants some - confirmed on exam

plan: Pen VK 500 q 4 p & id #40

Reviewed By:  
V. Geza, PharmD

*[Signature]*  
H. BEAM, MD  
FCI MCKEAN

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT FCI McKean
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

Baker, Darryl 19613-039

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

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NSN 7540-00-834-4176

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## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)

3/11/04  
1315h

S/ I received a report this AM dated 3/9/04 from this 1st saying he had problem in eye.

He was assaulted 2/27/04  
S/ suffered contusion about the face back 4 AM. Says his eye got punched; it was sore but cleared up after that.

S/H

In past 5 days, is sore crease of  
of lower lid & weeping; red  
No photophobia. He was when  
looking extremely down

07 look well Eyes: PERRA  
EOM Full - Lateral  
pendoscopic and lateral  
@ conjunctiva not red  
@ conjunctiva not red  
Aberration lower lid @ eye  
watery @ eye

over ↓

HOSPITAL OR MEDICAL FACILITY

STATUS

DEPART./SERVICE

RECORDS MAINTAINED AT

FCI McKean

SPONSOR'S NAME

SSN/ID NO.

RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex;  
Date of Birth; Rank/Grade.)

REGISTER NO.

19613-039

WARD NO.

Darryl Balen

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000040

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
3/11/09 1315	Denier trying recently on trauma Acuity 20/30 B/L laterally at P. keratic staining - no cones/ defect @ cones slight tenderness frontol. S. cor.
	A7 abrasion lower lid (L eye - unknown how this happened I don't think it's related to The accident 2/27/09
SKM	P1 Pred. Neomycin - use of med Na Sulfate 2 qts Qid (L eye x 5 days #1 Optometrist contact 3/17
	after - S1 C/O recurrent burn - infection - on back of scalp wants ABX
	O7 mild folliculitis - back scalp
	M7 folliculitis
	M7 pred - ity given - Keflex 500 mg qd po Qid #20 IAN [Signature]

Reviewed By:  
V. Geza, PharmD

NSN 7540-00-634-4176

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## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)	
9/23/03 0845	No show for scheduled appt. must reschedule. J Glenn FMP-C	
12/4/03 0830	No show for scheduled appt. must reschedule. J Glenn FMP-C	
1-29-04 0755	<p>③ 90 head bumps that bleed + cause pain PCNVR worked. V comes back in 1 month but bump.</p> <p>PLW: burning/itching + 7/10 + itching</p> <p>HAS BUMPS OFF + ON SINCE HAIRCUT/imprisonment 4 years ago</p> <p>④ Scalp: @ 2mm diffuse pustular papules, scaling + some blood crusting</p> <p>⑤ Scalp Folliculitis</p> <p>⑥ 1. Erythromycin 500mg <math>\dot{\bar{t}}</math> po QID x 10 days, then 1 po BID. #40 R x 2</p> <p>2. Bleach/lyt Jy <math>\dot{\bar{t}}</math> po TID pm itching #15 NR</p> <p>3. Motrin 400mg <math>\dot{\bar{t}}</math> po QID pm pain #30 NR</p> <p>4. Pt to go to commissary for: ASA/APAC/IBU when Motrin bc done, for Selenium Sulfide Shampoo.</p> <p>5. EO: To plan, use of meds, NO SHORT HAIRCUTS.</p> <p>6. Pt understands. R/c pm</p> <p>Reviewed By: V. Geza, PharmD</p>	

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT FCI McKean
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO. 14613-039	WARD NO.

Baker, Darryl

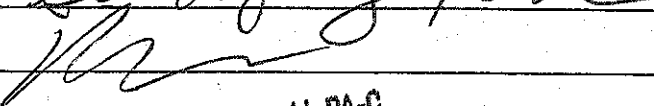
## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/ICMR  
FIRM (41 CFR) 201-9.202-1

000042



DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
2/29/04 0950hr	41 y/o AA M S/P assault - 2/27/04 See Injury Form  Robert E. Plotrowski, PA-C FCI McKean
3/9/04 1010 5/1u	S. SHA sick call. It did not have sick call slip, AW had asked HSA to stop. As it was being told this was for sick call he became verbally abusive and belligerent. He was told that his behavior was not appropriate and given another chance to discuss his health issue. He continued his abusive demeanor and language. The visit was ended at this point. Pt. was advised to sign up for sick call if needed to be seen. O: NAD well appearing exam not completed A: non-compliance PID Education - behavior is not tolerated, FCI PRN - Pt understands Eric Asp, PA-C FCI McKean

NSN 7540-00-634-4176

AUTHORIZED FOR LOCAL REPRODUCTION

## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
9/12/02 1220	Intake screening done & Known expos. to infect. dis. & H10 STD'S & H10 IVDA NKDA & head/body lice & suicidal ideations Gracia Fairbanks PA
	GRACIA FAIRBANKS Physician Assistant
2/28/03 1100	No show for 0830 call-out (sick call appt). S. Labrozzi Steven Labrozzi, PA-C Physician Assistant
3-28-03 2240	S: 1/2 "scalp bumps - infection x 3 weeks." States he has had the condition & the only medication that works is PCN VK. Requests tx. O: NAD. Scalp: 2 patch of black-crusted lesions on crown-back of head, & a few pustules. A: Folliculitis Capitis P: PCN VK, 250mg, 1 tab po qid x 7 days. #28 o.k. PE: examination: re scalp care. KFC prn. PT understands. B. Saylor NP
	BONNIE SAYLOR, NP FCI MCKEAN

HOSPITAL OR MEDICAL FACILITY	Reviewed by: [Signature] MD Date: 3/31/03	DEPART./SERVICE	RECORDS MAINTAINED AT FCI McKean
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO. 19613-039	WARD NO.

Baker, Daryl

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
by GSA/ICMR  
1 CFR 201-9.202-1

000044

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING	ACTION (Sign each entry)
3/31/03 1522h	See report Hx of Herpes zoster, scalp, scaly, weeping episodic pain has helped ingrown scalp - no active bleeding T959	
	A7 infected sebaceous	
	P1 PNE: Hygiene D/c Penicillin Keflex 500mg 2x/PO QID #28 RFD Selsun Shampoo use 2x/WC #1 RFD CB PMV	
		H. BEAM, MD FCI MCKEAN
4/10/03 5H4	See above Adm - says he never got Keflex Rx Keflex 500mg 2x/PO QID #40 RFD Selsun Shampoo use 2x/WC #1 RFD	
4/10/03 Violeta Lopez, PharmD, RPh Chief Pharmacist		H. BEAM, MD FCI MCKEAN

Current	1. <u>Healthy Male</u>	4. _____
Medical	2. _____	5. _____
Problems	3. _____	6. _____

Additional Comments - Blood and Body Fluid Precautions

Re: [redacted] Transferring Officer: Copy - Health Record (Top page Position: [redacted])

USP Lewisburg

Inmate Received, this date

8/30/02

Medical History Reviewed

☒ Yes ☐ No

Evidence of lice

☐ Yes ☐ No

Suicidal Thoughts

☐ Yes ☐ No

Recent Assault, Trauma or Abuse

☐ Yes ☐ No

Signs and Symptoms of Infect Dse

☐ Yes ☐ No

Allergies to Medications

☐ Yes ☐ No

Medications

☐ Yes ☐ No

*Ivan Navarro*

Ivan Navarro, PA

1228

9-12-02

O.K. For Transfer

USP Lewisburg

Medications Yes ☐ No ☒

*Ivan Navarro*

Ivan Navarro, PA

000047



## HEALTH RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

7/19/62  
SFR

STH

S - H - c Scalp lesion.  
H - c Pen. Sys. few  
lesion on Scalp still

Q NAD

Scalp - Several Scaly crusted

A - Scalp lesion

P @ PCK 2507 - 90d x 2d

Q Daily flr - STH Q PCK

Mk Grelitz

8/7/62  
1145

(STH)

P requesting to continue PCK for  
scalp folliculitis. In previous pt encounter  
P has been on PCK for 24 wks &  
notes almost completely resolved but feels that  
now has stopped & coming back.

O - A 90x3. NAD

Scalp: few papules on scalp seen one slightly  
purulent. Oblique is a small area that has been  
self excoriated. Hair is pink. Hair loss

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

RECORDS  
MAINTAINED

NAME (Last, First, Middle initial)

RELATIONSHIP TO SPONSOR

STATUS

SEX

RANK/GRADE

SPONSOR'S NAME

ORGANIZATION

DEPART./SERVICE SSN/IDENTIFICATION NO.

DATE OF BIRTH

FCI LORETTO  
Health Services Dept

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (Rev. 5-64)  
Prescribed by GSA and ICMR  
FIRM (41 CFR) 201-45.505

000048

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

8/7/02

Cont'd

A: Resolving folliculitis

P: 1. Educated Pt on findings & no need for  
prolonged antibiotic Tx as they are clearing - will  
give 1 additional week as follows:

(R) Tetracycline 250mg (SHU)

Sig: i PO QID x 7d. #28 (R) (SHU)

2. Do not debride & manipulate

3. Educated on skin care

4. RTC Daily SHU Rds prn

Tracey L. Tyger, PA-C  
Physician Assistant-Cert.

NSN 7540-00-834-4176

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MEDICAL RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)		
7.1.02	SHU		
0902	<p>S - PT E continued c/o scalp lesions. Says they bleed at times. Used cream, shampoo &amp; declanin 5 relief</p> <p>O - NAD T - no fever</p> <p>Scalp - Multiple small dark papules - firm - no blood</p> <p>A - Pseudofolliculitis of scalp</p> <p>P ① TCV 250 mg T bid x 7d REXI</p> <p>② Daily hair on SHU</p> <p style="text-align: right;">Mike Corda R</p>		
7/7/02 1050	<p>C. 40 yo black male seen in skin for type of posterior scalp. He states that he has been taking the antibiotic prescribed and has decreased the frequency of washing his hair to about 3x/week. He states that his scalp is improving / feels better</p> <p>C. Cooperative 40 yo male in exam</p> <p>He has left hair grown out / longer</p> <p style="text-align: center;">OVER</p> <p style="text-align: right;">Donald [Signature]</p>		
HOSPITAL OR MEDICAL FACILITY		STATUS	DEPART./SERVICE
SPONSOR'S NAME		SSN/ID NO.	RELATIONSHIP TO SPONSOR
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

Baker, Darryl  
19613-039

## CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600 (REV. 6-97)  
Prescribed by GSA/CMR  
FIRM (41 CFR) 201-9.202-1

000050

FCI LORETTO

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
7/9/02 CO 52	<p>red area continued</p> <p>posterior upper scalp with dandruff, red patches type area with no other bleeding, discharge or dried blood notes</p> <p>Area does appear to be somewhat improved since seen 6/5/02</p> <p>A/R I for scalp - appear with improvement. Patient instructed to continue avoidance of excessive washing / shampooing. Is using PCN from 7/1/02</p> <p>For I PCN - PCN</p> <p><i>[Signature]</i></p>
7.12.02 1025	<p>SITU</p> <p>S- Pt has tx for scalp lesion</p> <p>Sys PCN regimen still from lesion in scalp</p> <p>Q - Q Seabury scalp peeling</p> <p>Slight crusting on head</p> <p>A - Fall later</p> <p>P@ PCN 250g - 9.0 x 5.0</p> <p>@ Daily flur in SHen</p> <p><i>[Signature]</i></p> <p><i>[Signature]</i></p>

HEALTH RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)		
5/16/02 0925 (SHU)	<p>S) Pt seen with recurrent scalp folliculitis - see notes 9/18/01, 10/18/01 - good results c. Lidex cream</p> <p>D) mild scalp folliculitis</p> <p>A) as above</p> <p>P) - Lidex Cream to area b7D x 14dp MF+1 - F/a Daily SHU</p>		
5/31/02 0944 prior to 5/31/02 0915	<p>S) (SHU) Pt seen on AM SHU Las. He reports 4 wks of Lidex &amp; other topical s for tx of folliculitis over the last 6mo or so without noticeable result TX.</p> <p>D) AYOX's (COOPERATIVE Bm) seen in SHU clinic</p> <p>SCALP: ④ erythematous papules, no/pap over anterior scalp</p> <p>A) folliculitis infectious vs suppurative type</p> <p>P) due to long duration may be suppurative type - Pt made aware of this &amp; difficulty in tx if ever resolves because of scarring nature</p> <p>2. Will trial systemic TX. Pt to report R/O if unimproved but aware that may not be able to under. (SHU) De UOIX</p> <p>Rx Dicloxacillin 250mg Sig: Take 10 QID 7d #28 #3 Refills (4 wks total)</p>		
<p>PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint) 5/31/02</p> <p>Baker, Darryl</p> <p>19613 - 039</p> <p>FCI LORETTO Health Services Dep.</p>		<p>RECORDS MAINTAINED AT: Scott M. Molekoff, PA-C/PHH Physician Assistant-Cert.</p> <p>PATIENT'S NAME: Scott M. Molekoff, PA-C/PHH Physician Assistant-Cert.</p> <p>SEX:</p> <p>RELATIONSHIP TO SPONSOR:</p> <p>STATUS:</p> <p>RANK/GRADE:</p> <p>SPONSOR'S NAME:</p> <p>ORGANIZATION:</p> <p>DEPART./SERVICE:</p> <p>SSN/IDENTIFICATION NO.:</p> <p>DATE OF BIRTH:</p>	

CHRONOLOGICAL RECORD OF MEDICAL CARE

 STANDARD FORM 100 (Rev. 5-84)  
 Prescribed by GSA and ICMR  
 FIRM (41 CFR) 201-45.505



DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
6/17/02 1500	<p>Si 39 yo. black male seen in S.A. for hair comb-out request in response to his scalp rash. He c/o itching, bleeding, <sup>corrosive</sup> <sup>6/15/02</sup> red discoloration of his scalp. He notes that <sup>pharmacologist</sup> <sup>modified</sup> <sup>6/15/02</sup> Evamine did not help. He shows me the dicloxacillin he was recently given. He reports washing his head/scalp daily.</p>
	<p>Si Carpenter 39 yo male seen in S.A. call</p> <p>① Exam 6/17/02 <sup>125</sup> <sup>6/15/02</sup> <sup>OTC</sup> 86, for Grover, Temp = 92.0 F</p> <p>Arch of hair with dark, reddened patch type area with no weeping or purulent drainage currently seen. ① area of dried blood noted</p> <p>A/P i possible eczema of scalp - he is educated to reduce washing his scalp to only 1-2 x/week at deep soaps, <sup>corrosive</sup> <sup>6/15/02</sup> powders and other materials off of his skin/scalp. He is told to continue to use the dicloxacillin he was given. He is educated that he may have eczema type skin rash and by decreasing washing/scraping which dries the skin he may note improvement, but this will occur slowly. He is told to t/c in the Pt-C in a few weeks if no better, or sooner if he notes sudden worsening.</p> <p style="text-align: right;">- Daniel Leonard, M.D. Clinical Director</p>

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HEALTH RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)		
7/13/00 1315	<p>S) Pt seen with med folliculitis on scalp present x 2 months.</p> <p>A) med folliculitis scalp</p> <p>R) Folliculitis scalp</p> <p>P) - Selsun Shampoo two times weekly x 30 days Refill x 2</p> <p style="text-align: right;">MIDDGEMUFF PRN</p>		
7-24-01 RM6 1230	<p>S) Pt c/o 1 month h/o rash on scalp. Denies pruritus, drainage from lesions &amp; F/C.</p> <p>O NAO, A40X3, ambulatory, T = 97.8F, Skin: @ parietal scalp area there is a patch of papules located @ the hair follicle/shaft &amp; crusted yellow scales @ the heads.</p> <p>A) Folliculitis Capitis</p> <p>P) ① Wash scalp BID w H<sub>2</sub>O &amp; Soap          ② Avoid cutting hair so short.          ③ (Lx) Polysporin apply BID #1 REF x 2          ④ RTC PRN</p> <p style="text-align: right;">Golden</p> <p style="text-align: right;">Robin Golden, PA-C Physician Assistant-Cert.</p>		

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

Baker, Darryl  
19613-039

FCI LORETTO  
Health Services Dept

RECORDS MAINTAINED AT:		PATIENT'S NAME (Last, First, Middle initial)		SEX
RELATIONSHIP TO SPONSOR		STATUS		RANK/GRADE
SPONSOR'S NAME			ORGANIZATION	
DEPART./SERVICE	SSN/IDENTIFICATION NO.			DATE OF BIRTH
				000054

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (Rev. 5-84)  
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FPMR (41 CFR) 201-45.505